Connecticut Coalition of Advanced Practice Nurses

American College of Nurse-Midwives (ACNM), Region I, Chapter 2
Connecticut Advanced Fractice Registered Nurse Society (CT APRNS)
Connecticut Association of Nurse Anesthetists (CANA)
Connecticut Nurses' Association (CNA)
Connecticut Society of Nurse Psychotherapists (CSNP)
National Association of Pediatric Nurse Practitioners (NAPNAP), Connecticut Chapter
The Northwest Nurse Practitioner Group

COMMITTEE ON PUBLIC HEALTH PUBLIC HEARING MARCH 16, 2009 TESTIMONY IN SUPPORT OF RAISED BILL #6674, AAC WORKFORCE DEVELOPMENT AND IMPROVED ACCESS TO HEALTH CARE SERVICES

Senator Harris, Representative Ritter and Members of the Public Health Committee:

Thank you for your consideration of the proposed statutory change that will eliminate the requirement for a mandatory collaborative agreement between an APRN and a physician.

I am Lisabeth Johnston PhD, APRN. I am President of the Connecticut Society of Nurse Psychotherapists and a practicing nurse psychotherapist and prescriber at my office in West Hartford; full time for 11 years and part time for 10 years before that. I am speaking in support of this change on behalf of our Society. Our members are educated at the masters or doctoral level and have been providing diagnostic, psychotherapeutic, and psychopharmacological services to adults and children across Connecticut for years in every type of health care setting including autonomous office practice settings like mine. There are no physicians on the premises in these autonomous settings.

Each of us actively collaborates with physicians and other members of the patient's healthcare team, doing so according to patient need and in accordance with Nursing Standards of Practice which make collaboration integral to safe and excellent patient care. In addition, we each have a written collaborative agreement with one physician who usually has no connection to any given patient, in order to comply with the Connecticut nursing statute.

This statutory mandate requiring APRNs to find and maintain that link to one physician is redundant in terms of providing safe, effective care for patients. It has made many colleagues reluctant to establish psychiatric mental health practices because of concerns about being able to rely on the continuity of the collaborative agreement. It is also a disincentive for APRNs to practice in this state since neighboring states have changed their laws to allow for independent APRN practice.

Please read the testimony of our member, Lisa Cloutier APRN, which I have attached. She may stop treating children due to this statutory restriction on her busy and successful Psychiatric APRN practice. This is alarming in an environment in which children and parents are desperately seeking mental health treatment and care.

We ask that you support this bill to remove mandatory collaboration from statutory language so that APRNs can be fully available and accessible to patients in need of mental health care.

123 South Main St. Unit 3 East Windsor, CT 06088 Phone/Fax (860) 627-7776

Testimony to the Public Health Committee re:

Raised Bill # 6674, AN ACT CONCERNING WORKFORCE DEVELOPMENT AND IMPROVED ACCESS TO HEALTH CARE SERVICES

March 16, 2009

Representative Ritter, Senator Harris and members of the Public Health Committee:

I am Lisa Cloutier, APRN and I am submitting testimony today in **support** of Raised Bill #6674. I work as a Psychiatric APRN in private practice and I provide outpatient psychiatric psychotherapy and psychopharmacological services to approximately 275 adult patients and 75children and adolescents.

I have been in private practice for 7 years. During that time I have had my practice disrupted twice when the collaborator I was using for both my child and adult practice closed their practice to take staff positions at a local hospital. It has been such a difficult, frustrating process of trying to find a collaborator that I have decided that if I lose my present collaborator, I will stop treating children and adolescents.

As a practitioner in private practice working with children and their families, I actively collaborate with pediatricians, neurologists, school psychologists, APRNs, and other members of the patient's healthcare team. I do this according to Nursing Standards of Practice and in response to the needs of the patients I treat. Eliminating the requirement for a collaborative agreement with a particular physician would not change the way I conduct my practice. Eliminating the requirement would allow me to continue to provide high quality, affordable mental health care to children and adolescents.

Thank you for your consideration of this important issue.

Lisa Cloutier, APRN